

TOWN OF GREECE APPLICATION FOR LANDMARK DESIGNATION

Case #				
1.	Property Address:			
2.	Tax Account Nu	mber:		
3.	Name of Applicant: Zip Code:			
	Address: Phone:		Zip Code:	
	Interest in Prop Owner Other (explain) _	Lessee	Holding Option	
4.	Owner (if other than above): Address: Zip Code:			
	Address:		Zip Code:	
	Phone:			
	Has owner been	contacted by applicant?	Yes No	
5.	Application Prepared By: Zip Code:			
	Address:		Zip Code:	
	Phone:			
6.	Attorney (if any):		
	Address: Phone:		Zip Code:	
7.	Present Use of F	Property	· · · · · · · · · · · · · · · · · · ·	
For Internal Use:		Application Received:	Notification Letter:	
Letter of Concurrence:		Public Hearing:	Landmark Approved/Denied:	
Determination Notice to Owner, Town				

Statement of Significance:

Explain why the property should be designated as a landmark. (Attach additional sheets if necessary.)

Date of Construction:					
Architect:					
Facts/Information on known alterations and additions (include dates and architects or builders):					
Current exterior condition (describe construction, finishes and state of repair):					
Outbuildings (list existing outbuildings and describe significance and state of repair):					
Landscape (describe features and conditions including approximate size and type of trees):					
Attach photograph and tape location map survey, if available.					

B. Statement on History (indicate sources of information):	
Significant historical events associated with the pro	perty and dates:
Well-known persons associated with the property, a	and how associated:
C. Statement of Architecture:	
Architectural style or period:	
Architectural interest and merit:	
Is the architecture unique to the Town or region?	Yes No
I/We certify that the information supplied on this applica accurate.	tion is complete and
Signature of Applicant	Date
Concurrence If different from applicant, does current owner concur with the	his application?
() YES () NO	
Owner's Signature	